



TOWN OF CONCORD

An Equal Opportunity Employer

EMPLOYMENT APPLICATION

BOTH PAGES MUST BE LEGIBLY COMPLETED

Return to: Human Resources Dept., 22 Monument Square

OR Mail to: P.O. Box 535, Concord, MA 01742

Name _____
First Middle Last
Address _____
City _____ State _____ Zip _____
Home # (_____) _____ Cell # (_____) _____
Email Address _____

Position Applying for: _____
How did you learn of this position, please be specific (i.e. Concord's website, Name of Newspaper, etc.): _____
Schedule: Continuous ☐ Seasonal ☐ Full Time ☐ Part Time ☐ Either ☐

Do you have relatives working for the Town of Concord? Yes ☐ No ☐
Are you, or any relative, a member of any Town Board or Commission? Yes ☐ No ☐
If yes to either, please specify _____

If hired, can you provide proof of citizenship or legal right to work in the US? Yes ☐ No ☐
Are you under 18 years of age? If yes, a work permit is required. Yes ☐ No ☐

SPECIAL SKILLS (Below please list special skills applicable to this position)

____ Typing (WPM ____) ____ Word Processing / Equipment/Programs ____ Shorthand (WPM ____)	____ 10 Key Calculator ____ Computers - Equipment/Programs	Licenses: _____ _____ _____ _____	Shop or Heavy Equipment: _____ _____ _____ _____
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Other: _____

EDUCATION HISTORY

Highest Level of Education: _____ Grade School _____ High School Diploma or equivalent
____ Vocational, Technical Diploma or Certificate
____ Associates Degree _____ Bachelors Degree _____ Post Grad. Degree

Name and Address of Schools (High School and Above)	Major Fields of Study	Number of years completed or type of degree received

Other Training you received (e.g. Work Training Programs, Armed Forces Training, Special Courses, etc.):

Additional information that may be helpful in establishing your qualifications. (Awards, Professional Affiliations, etc.)

EMPLOYMENT RECORD

This section must be completed. A resume cannot be substituted. List most recent position first. Include relevant summer employment or work performed on a voluntary basis.

Name of Company _____ Dates Employed From _____ To _____
month/year month/year
Address _____ Salary _____ hr/mo/wk/yr Hours per Week _____
Your Supervisor _____ Reference phone # (_____) _____ - _____
Your Position Title _____ Summarize your duties _____

Reason for Leaving (or Seeking Other Employment) _____

Name of Company _____ Dates Employed From _____ To _____
month/year month/year
Address _____ Salary _____ hr/mo/wk/yr Hours per Week _____
Your Supervisor _____ Reference phone # (_____) _____ - _____
Your Position Title _____ Summarize your duties _____

Reason for Leaving _____

Name of Company _____ Dates Employed From _____ To _____
month/year month/year
Address _____ Salary _____ hr/mo/wk/yr Hours per Week _____
Your Supervisor _____ Reference phone # (_____) _____ - _____
Your Position Title _____ Summarize your duties _____

Reason for Leaving _____

Name of Company _____ Dates Employed From _____ To _____
month/year month/year
Address _____ Salary _____ hr/mo/wk/yr Hours per Week _____
Your Supervisor _____ Reference phone # (_____) _____ - _____
Your Position Title _____ Summarize your duties _____

Reason for Leaving _____

I understand that entering into and continuing employment with the Town is subject to the verification of my statements and receipt of satisfactory references. I understand that any false answers or statements and/or withholding of information will be sufficient grounds to terminate my employment at any time.

Applicant Signature _____ Date _____

It is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liabilities.